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Applicant: Sanford L. Britt
Serial No.: 10/792,041
Filed: March 3, 2004
Examiner: Robert R. Raevis
Art Unit: 2856
Docket: 03-535-Z

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 CFR 1.8

The undersigned hereby certifies that the following:

1. Response to Notice Requiring Excess Claims Fees
2. Copy of Notice Requiring Excess Claims Fees
3. Credit Card Payment Form Authorizing \$100.00
4. Return Receipt Postcard

are being deposited with the U.S. Postal Service on the date subscribed below, with sufficient postage as first class mail, in an envelope addressed to Commissioner for Patents,
P.O. Box 1450, Alexandria, VA 22313-1450

Donna Miller Date: 5-15-06
Donna Miller



Docket No. 03-535-Z

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Sanford L. Britt

Serial No. 10/792,041

Filing Date: March 3, 2004

For: DUAL-OPENING SAMPLE
CONTAINERS, FLUID SAMPLING)
DEVICE AND METHOD OF
USING SAME

PATENTS

Primary Examiner:
Robert R. Raevis

Art Unit 2856

RESPONSE TO NOTICE REQUIRING EXCESS CLAIMS FEES

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Notice Requiring Excess Claims Fees mailed May 9, 2006, enclosed
please find a credit card form in the amount of \$100.00 as fee for the added claim.

05/19/2006 EHAILE1 00000024 10792041

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Respectfully submitted,

BELASCO JACOBS & TOWNSLEY, LLP

Dated: May 15, 2006

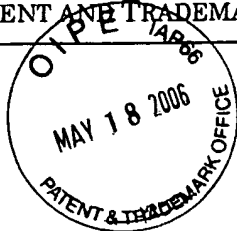
By:

David A. Belasco
Registration No. 41,609
Attorney for Applicant

Enclosures



10/792,041



Commissioner for Patents
United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450
www.uspto.gov

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NOTICE REQUIRING EXCESS CLAIMS FEES

The excess claim(s) filed on 4/21/06 is not accompanied by the appropriate payment of excess claims fees set forth in 37 CFR 1.16(h)-(j) or 1.492(d)-(f). Excess claims fees are required for each claim in independent form in excess of three (§ 1.16(h)), each claim (whether dependent or independent) in excess of twenty (note that § 1.75(c) indicates how multiple dependent claims are considered for fee calculation purposes) (§ 1.16(i)), and each application that contains a multiple dependent claim (§ 1.16(j)).

Since the application is not under a final rejection, applicant is given a time period of **ONE (1) MONTH or THIRTY (30) DAYS** from the mailing date of this notice, whichever is longer, to submit either: (1) the fee payment of \$ 100, or (2) an amendment in compliance with 37 CFR 1.121 that cancels the excess claim(s), in order to avoid **ABANDONMENT**. Extensions of this time period may be granted under 37 CFR 1.136, unless the excess claim(s) was presented in a preliminary amendment.

- ☐ 1. The funds in Deposit Account No. _____ are insufficient to cover the entire fee due. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
- ☐ 2. The Credit Card payment to cover the entire fee due to Account _____ (Card type + last 4 digits ONLY) was refused. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
- ☒ 3. The amendment that includes the excess claim(s) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record (PTO/SB/06). Remittance or authorization is due within the time period set forth in this notice.
- ☐ 4. The fee submitted in this application is insufficient. A balance of \$ _____ is due for presentation of excess claims (37 CFR 1.16(h)-(j) or 1.492(d)-(f)).
- ☒ 5. Other. See attachment.

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):

THE AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE, GENERALLY ON OCTOBER 1 OF EACH YEAR (37 CFR 1.16, 1.21 & 1.492). THE AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE REPLY WITH THE APPROPRIATE FEE(S) IS RECEIVED BY THE OFFICE (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS SUBJECT TO CHANGE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE WHICH IS AVAILABLE ON THE USPTO'S WEBSITE AT: <http://www.uspto.gov/web/offices/ac/qs/ope/fees.htm>

Service Charges: There is a \$50 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)). There is a \$25.00 service charge for each month when the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).

Ms. Ally (571) 272-1636
Technical Support Staff (TSS)

Note to TSS: Please do NOT use this notice if the application is under a final rejection.